## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number
A-8051. CIP

| CLAIMS AS FILED - PART I   |  |  |                                       |                                   |              |                  |     | SMALL ENTITY TYPE                       |                        |         | OTHER THAN OR SMALL ENTITY |                        |  |
|--|--|--|---------------------------------------|-----------------------------------|--------------|------------------|-----|---|------------------------|---------|----------------------------|------------------------|--|
| TOTAL CLAIMS .   |  |  | (Column 1)                            |                                   | (Colu        | (Column 2)       |     |   |                        | OR<br>1 |                            |                        |  |
| TOTAL CLATIVIS   |  |  | 41                                    |                                   |              |                  |     | RATE                                    | FEE                    | -       | RATE                       | FEE                    |  |
| FOR  |  |  | NUMBER FILED                          |                                   | NUMBER EXTRA |                  |     | BASIC FEE                               | 385.00                 | OR      | BASIC FEE                  | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |  | Ul mir                                | nus 20=                           | *            | * 21             |     | X\$ 9=                                  | 189                    | OR      | X\$18=                     |                        |  |
| INDEPENDENT CLAIMS   |  |  | 3 minus 3 = * ~                       |                                   |              |                  |     | X43=                                    | ,                      | OR      | X86=                       |                        |  |
| MU   | LTIPLE DEPEN                                   | NDENT CLAIM PI                                 | RESENT                                |                                   |              |                  |     | +145=                                   | _                      | OR      | +290=                      |                        |  |
| * If   | the difference                                 | in column 1 is                                 | less than zero, enter "0" in column 2 |                                   |              |                  | •   | TOTAL                                   | 574                    | OR      | TOTAL                      |                        |  |
| CLAIMS AS AMENDED - PART II  |  |  |                                       |                                   |              |                  |     | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                        |         |                            |                        |  |
| _  |  | (Column 1) CLAIMS                              | (Colun                                |                                   |              | (Column 3)       |     | SIVIALL                                 |                        | Un<br>1 | JWALL.                     |                        |  |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT                |                                       | NUME<br>PREVIO<br>PAID F          | BER<br>OUSLY | PRESENT<br>EXTRA |     | RATE                                    | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *  | Minus                                 | **                                |              | =                |     | X\$ 9=                                  |                        | OR      | X\$18=                     |                        |  |
|  | Independent                                    | *  | Minus                                 | ***                               |              | =                |     | X43=                                    |                        | OR      | X86=                       |                        |  |
|  | FIRST PRESE                                    | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                       |                                   |              |                  |     | +145=                                   |                        | OR      | +290=                      |                        |  |
| TOTAL  |  |  |                                       |                                   |              |                  |     |   |                        |         | TOTAL                      |                        |  |
|  |  | ,  | ADDIT. FEE                            |                                   | OR           | ADDIT. FEE       |     |   |                        |         |                            |                        |  |
|  |  | 1 6  | · · · · · · · · · · · · · · · · · · · |                                   |              |                  |     |   |                        |         |                            |                        |  |
| AMENDMENT B  |  | REMAINING NUM                                  |                                       | HIGHE<br>NUME<br>PREVIO           | BER          | PRESENT<br>EXTRA |     | RATE                                    | ADDI-<br>TIONAL        |         | RATE                       | ADDI-<br>TIONAL        |  |
|  |  | AMENDMENT                                      |                                       | PAID                              |              | LXIIIA           | 1   |   | FEE                    |         |                            | FEE                    |  |
|  | Total  | *  | Minus                                 | **                                |              | =                |     | X\$ 9=                                  |                        | OR      | X\$18=                     |                        |  |
|  | Independent                                    | *  | Minus                                 | ***                               |              | =                | 1 1 | X43=                                    |                        | OR      | X86=                       |                        |  |
| •  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                       |                                   |              |                  | J   | .145                                    |                        | l       | +290=                      |                        |  |
|  |  |  |                                       |                                   |              |                  | Ĺ   | +145=                                   |                        | OR      | TOTAL                      |                        |  |
|  |  |  |                                       |                                   |              |                  |     | TOTAL<br>ADDIT. FEE                     | <u> </u>               | OR      | ADDIT. FEE                 |                        |  |
|  |  | (Column 1)                                     |                                       | (Colum                            |              | (Column 3)       | _   |   |                        |         |                            |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT      |                                       | HIGHE<br>NUME<br>PREVIO<br>PAID F | BER<br>JUSLY | PRESENT<br>EXTRA |     | RATE                                    | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *  | Minus                                 | **                                |              | = .              |     | X\$ 9=                                  |                        | OR      | X\$18=                     |                        |  |
|  | Independent                                    | *  | Minus                                 | ***                               |              | ]=               |     | X43=                                    |                        | OR      | X86=                       |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                       |                                   |              |                  |     | +145=                                   |                        | OR      | +290=                      |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |  |                                       |                                   |              |                  |     |   |                        |         | ADDIT. FEE                 |                        |  |